Supplementary text, tables and figures for "Seven newly identified loci for autoimmune thyroid disease"

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Supplementary Tables

Table S1: Evidence for reported AITD non-HLA susceptibility loci. Genotype signal intensity cluster plots have been examined visually. Note that the AITD locus *SCGB3A2*/5q32 was not included on the ImmunoChip. Hashimoto's thyroiditis (HT), Graves' disease (GD), minor allele frequency (MAF), odds ratio (OR) and confidence interval (CI).

			2,285 GD patients and 9,364 controls		462 HT patients and 9,364 controls		Heterogeneity in disease	2,282 GD, 451 HT and 9,364 controls	
Gene Karyotype band	Most associated SNP	MAF in in controls	OR (95% CI)	P-value	OR (95% CI)	P-value	P-value	OR (95% CI)	P-value
PTPN22 1p13.2	rs2476601 G>A	0.0962	1.55 (1.41-1.71)	$4.03x10^{-16}$	2.02 (1.69-2.41)	$3.74x10^{-15}$	†6.76x10 ⁻³	1.63 (1.49-1.78)	9.69 <i>x</i> 10 ⁻²³
<i>FCRL3</i> 1q23.1	rs7522061 T>C	0.480	1.16 (1.08-1.23)	$1.08x10^{-5}$	1.03 (0.90-1.18)	0.634	0.122	1.14 (1.07-1.21)	2.36x10 ⁻⁵
CTLA4/ICOS 2q33.2	rs11571297 G>A	0.493	0.72 (0.67-0.77)	2.81 <i>x</i> 10 ⁻²³	0.82 (0.72-0.94)	$3.21x10^{-3}$	0.0682	0.73 (0.69-0.78)	$2.09x10^{-23}$
<i>IL2RA</i> 10p15.1	rs706779 A>G	0.467	0.85 (0.80-0.91)	$2.27x10^{-6}$	0.84 (0.74-0.96)	0.0125	0.858	0.85 (0.80-0.91)	$2.69x10^{-7}$
<i>TSHR</i> 14q31.1	rs2300519 T>A	0.380	1.54 (1.44-1.64)	$1.34x10^{-38}$	0.93 (0.81-1.07)	0.295	$4.64x10^{-12}$		

†Assuming 13 [8 (Table 1) and 5 (Table S1)] independent tests, the adjusted *P*-value was $3.85x10^{-3}$ for the 0.05 level of significance based on a Bonferroni correction for multiple testing.

Table S2: A summary of SNPs that show large allele frequency differences ($P < 1.12x10^{-6}$) between controls from the 12 geographical regions of Great Britain (Materials and Methods). Genotype signal intensity cluster plots have been examined visually for these highly differential SNPs (two SNPs were dropped rs2310187/2q12.1 and rs12210050/6p25.3). We note that the most significant *LCT* SNP, rs2236783/2q21.3 ($P = 1.41x10^{-5}$), was above the threshold *P*-value. Positions are in NCBI build 36 co-ordinates. distance in base pairs (dist).

Chromosome	Gene	Reported	Position	P-value	
		SNP	(base pairs)		
2	IL1R2(dist=99131),IL1R1(dist=26387)	rs12470623	102110447	1.52e - 07	
2	IL1R2(dist=101821),IL1R1(dist=23697)	rs6752379	102113137	1.52e - 07	
2	IL1R2(dist=116654),IL1R1(dist=8864)	rs11123911	102127970	1.51e - 07	
2	IL1R2(dist=118953),IL1R1(dist=6565)	rs13035227	102130269	1.04e - 06	
2	IL1R2(dist=119894),IL1R1(dist=5624)	rs6754776	102131210	1.09e - 06	
2	IL1R1 /	rs871658	102138297	1.07e - 06	
2	RAB3GAP1	rs7570971	135554376	9.01e - 09	
2	RAB3GAP1	rs6730157	135623558	4.32e - 09	
2	RAB3GAP1(dist=26518),ZRANB3(dist=2777)	rs1375131	135671267	2.22e - 09	
2	ZRANB3	rs1561277	135808531	3.49e - 07	
2	R3HDM1	rs56369224	136045360	5.29e - 08	
2	R3HDM1	rs12465802	136097818	1.10e - 07	
2	MCM6	rs4988235	136325116	2.54e - 09	
2	MCM6	rs182549	136333224	6.56e - 09	
2	DARS	rs6754311	136424452	4.49e - 09	
2	DARS	rs12615624	136438073	2.74e - 07	
4	TLR1(dist=9090),TLR6(dist=9827)	rs4833103	38491897	2.40e - 10	
6	IRF4	rs12203592	341321	4.31e - 22	
6	IRF4(dist=9838),EXOC2(dist=63857)	rs62389423	366281	1.44e - 15	
6	IRF4(dist=11188),EXOC2(dist=62507)	rs62389424	367631	3.69e - 15	
6	IRF4(dist=13472),EXOC2(dist=60223)	rs9405661	369915	1.09e - 06	
6	IRF4(dist=20607),EXOC2(dist=53088)	rs6925797	377050	1.52e - 07	
16	ZNF764	imm_16_30477512	30477512	1.67e - 07	
16	ZNF785	rs9934806	30500560	1.02e - 07	
16	ZNF689	rs8063005	30525199	9.15e - 08	
16	PHKG2	rs72793380	30666244	5.76e - 07	

Supplementary Figures

Figure S1: Single-locus 1-df Cochran-Armitage trend test results at the recently reported novel AITD susceptibility locus 6q27 (1). The most disease associated SNP, imm-6-167338101 ($P = 1.6x10^{-7}$ in HT and GD patients/controls; Table 1), was located within *FGFR10P*. The top panel — GD patients and controls; the middle panel — HT patients and controls; and, the bottom panel — GD and HT patients and controls.



Figure S2: Single-locus 1-df Cochran-Armitage trend test results at the novel AITD susceptibility locus 1q36.32. The most disease associated SNP, rs2843403 ($P = 7.9x10^{-7}$ in GD patients/controls; Table 1), was located within *MMEL1*. The top panel — GD patients and controls; the middle panel — HT patients and controls; and, the bottom panel — GD and HT patients and controls.



Figure S3: Single-locus 1-df Cochran-Armitage trend test results at the novel AITD susceptibility locus 3q27.3/3q28. The most disease associated SNP, rs13093110 ($P = 3.7x10^{-8}$ in HT and GD patients/controls; Table 1), was located within *LPP*. The top panel — GD patients and controls; the middle panel — HT patients and controls; and, the bottom panel — GD and HT patients and controls.



Figure S4: Single-locus 1-df Cochran-Armitage trend test results at the novel AITD susceptibility locus 6q15. The most disease associated SNP, rs72928038 ($P = 1.2x10^{-7}$ in HT and GD patients/controls; Table 1), was located within *BACH2*. The top panel — GD patients and controls; the middle panel — HT patients and controls; and, the bottom panel — GD and HT patients and controls.



Figure S5: Single-locus 1-df Cochran-Armitage trend test results at the novel AITD susceptibility locus 12q12. The most disease associated SNP, rs57348955 ($P = 3.8x10^{-8}$ in GD patients/controls; Table 1), was located within *PRICKLE1*. The top panel — GD patients and controls; the middle panel — HT patients and controls; and, the bottom panel — GD and HT patients and controls.



Figure S6: Single-locus 1-df Cochran-Armitage trend test results at the novel AITD susceptibility locus 16p11.2. The most disease associated SNP, rs57348955 ($P = 3.8x10^{-8}$ in GD patients/controls; Table 1), was located 82.6 kb upstream of *ITGAM*. The top panel — GD patients and controls; the middle panel — HT patients and controls; and, the bottom panel — GD and HT patients and controls.



Figure S7: Single-locus 1-df Cochran-Armitage trend test results at the novel AITD susceptibility locus 2p25.1. The top panel — GD patients and controls; the middle panel — HT patients and controls; and, the bottom panel — GD and HT patients and controls.



Figure S8: Single-locus 1-df Cochran-Armitage trend test results at the novel AITD susceptibility locus 11q21. The top panel — GD patients and controls; the middle panel — HT patients and controls; and, the bottom panel — GD and HT patients and controls.



Figure S9: Per-sample call-rates versus heterozygosity across chromsomes 1 to 22 for WTSI control samples. Dashed lines denote the quality controls thresholds applied.



Figure S10: Per-sample call-rates versus heterozygosity across chromsomes 1 to 22 for UVA control samples. Dashed lines denote the quality controls thresholds applied.



Figure S11: Per-sample call-rates versus heterozygosity across chromsomes 1 to 22 for AITD patient samples. Dashed lines denote the quality controls thresholds applied.



Figure S12: Ancestry clusters based on HapMap2 reference samples and SNPs available on the ImmunoChip that differentiated between the three HapMap populations (CEU, YRI and JPT+CHB) to derive two principal component scores for ancestry to exclude WTSI control subjects with substantial non-European ancestry. We excluded 18 WTSI controls subjects.



Figure S13: Ancestry clusters based on HapMap2 reference samples and SNPs available on the ImmunoChip that differentiated between the three HapMap populations (CEU, YRI and JPT+CHB) to derive two principal component scores for ancestry to exclude UVA control subjects with substantial non-European ancestry. We excluded five UVA control subjects.



Figure S14: Ancestry clusters based on HapMap2 reference samples and SNPs available on the ImmunoChip that differentiated between the three HapMap populations (CEU, YRI and JPT+CHB) to derive two principal component scores for ancestry to exclude AITD patients with substantial non-European ancestry. We excluded three AITD patients.



Figure S15: Quantile-quantile plot for the 1 degree-of-freedom association tests between WTSI and UVA control samples. The overdispersion factor (λ) of the 1-df association tests was 1.017.



References

1. Chu, X., *et al.* (2011) A genome-wide association study identifies two new risk loci for Graves' disease. *Nat Genet* **43**, 897-901.